



Form No. 3S
(A/02-09)

Town of Spencer Sewer Department

90 N West Street
Spencer, Indiana 47460
Phone (812) 829-3213

CHANGE ORDER SERVICE REQUEST

Effective Date:	Type of Change: <input type="checkbox"/> Disconnect /Canceling <input type="checkbox"/> Ownership/Tenant Change <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change		
Name:	Social Security No.	Phone No.	
Address:			
Previous Name and Address if this is a name or address change request:			
Address to send final bill to if disconnecting/canceling service:			
Name and Address of Previous Owner if this is a ownership/tenant change:			
If you are currently renting or buying the home receiving sewer utility service please provide the name, address and phone number of the Landlord/Landowner:			
Additional Comments:			

OFFICE USE ONLY

Sewer Account No.:	Meter No.:	Water Location No.:
BB-P final meter read date:		Final Meter Reading: